

CLAIMS ONLY							Application Number 10-615639		Filing Date		
							Applicant(s)				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments				
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1											
2							51				
3							52				
4							53				
5							54				
6							55				
7							56				
8							57				
9							58				
10							59				
11							60				
12							61				
13							62				
14							63				
15							64				
16							65				
17							66				
18							67				
19							68				
20							69				
21							70				
22							71				
23							72				
24							73				
25							74				
26							75				
27							76				
28							77				
29							78				
30							79				
31							80				
32							81				
33							82				
34							83				
35							84				
36							85				
37							86				
38							87				
39							88				
40							89				
41							90				
42							91				
43							92				
44							93				
45							94				
46							95				
47							96				
48							97				
49							98				
50							99				
Total							100				
Indep	1						Total				
Depend	5						Indep				
Total	6						Depend				
Claims							Total				